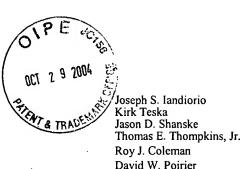
PART B - FEE(S) TRANSMITTAL

	Complete and send t	his form, together wi	th applicable f	<u>Iail</u>	ail Mail Stop ISSUE FEE Commissioner for Patents				
			P.O. Box 1450						
				Alexandria, Virginia 22313-1450 or <u>Fax</u> (703) 746-4000					
								should be completed where	
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address; and/or (b) indicating a separate maintenance fee notifications.								ent correspondence address as eparate "FEE ADDRESS" for	
		CE ADDRESS (Note: Use Block 1 for	any change of address)		_ (i)	Note: A certificate of	mailing can only be used	l for domestic mailings of the	
į	_		/	OCT 2 9 2	ក្រ ក្រ	Fee(s) Transmittal. The papers, Each addition	is certificate cannot be use al paper, such as an assign	ed for any other accompanying ment or formal drawing, must	
	7: Iandiorio & Tesk	590 10/12/2004		-0, 7 2 7	004 🚜	i	e of mailing or transmissio		
	260 Bear Hill Road		;	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United					
	Waltham, MA 024	`	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.						
L/01/2004 ZJUHAR2 00000034 10657424 Lessie Ruano								(Depositor's name)	
			(Signature)						
۱.	C:2501 C:1504	1504 300.00 gp					10-20-04	(Date)	
}*F	C-8001 APPLICATION NO.	FILING DATE	FIRST NAME		DINVEN	TOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.	
	10/657,424				George P. Emerson		EMER-101J	9033	
TITLE OF INVENTION: INSUFFLATION-EXSUFFLATION SYSTEM WITH PERCUSSIVE ASSIST FOR REMOVAL OF BRONCHO-PULMONARY SECRETIONS									
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	APPLN, TYPE			EE PUBLIC		BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
	nonprovisional			\$685 T UNIT C		\$300	\$985	01/12/2005	
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	LEWIS, AARON J		3743			128-205120	,		
	1. Change of correspondence address or indication of "Fee Address" (CFR 1.363).			2. For prin	ting on	he patent front page, li	st Tand	liorio & Teska	
-	CFR 1.303). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
	Address form PTO/SB/12	ation form	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to						
	"Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
	(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
	J.H. Emerson Company Cambridge, MA								
\cdot									
Please check the appropriate assignee category or categories (will not be printed on the patent):									
	4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): Sample Sample								
Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.									
	Advance Order - # of	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0002 (enclose an extra copy of this form).							
Deposit Account Number <u>(19-000)2</u> (enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above)								a copy of this form).	
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.									
The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party i interest as shown by the records of the United States Patent and Trademark Office.									
	Authorized Signature		Date 10/26/04						
	Typed or printed name / Jason D. Shanske					Registration	No. 43,6	115	
	This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.								
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October 26, 2004

Mail Stop Issue Fee Commissioner of Patents P.O. Box 1450 Alexandria, VA 22313-1450

SUBJECT:

Applicant:

George P. Emerson

Title:

INSUFFLATION EXSUFFLATION SYSTEM WITH

PERCUSSIVE ASSIST FOR REMOVAL OF **BRONCHO-PULMONARY SECRETIONS**

Serial No:

10/657,424

Filed:

September 8, 2003

Confirmation No:

9033

Date Mailed: October 12, 2004

Examiner:

Lewis, Aaron J.

Group:

3743

Docket No:

EMER-101J

Dear Sir:

Enclosed are the Form PTOL-85 and a check in the amount of \$1015.00, including \$685.00 for the Issue Fee, \$300.00 for the Publication Fee and \$30.00 for ten (10) copies of the issued patent.

If at any time it appears that a telephone conference with counsel would help to advance prosecution, please telephone the undersigned or his associates, collect in Waltham, Massachusetts, at (781) 890-5678.

If any payment during prosecution is found to be incorrect, please charge any deficiency or credit any overpayment to my Deposit Account No. 09-0002. A copy of this letter is enclosed for use by the Finance Branch in the event that it is necessary to make any charge or credit any overpayment to my deposit account.

Kindly acknowledge receipt of the foregoing by returning the enclosed self-addressed postcard.

Commissioner for Patents October 26, 2004 Page 2

Sincerely

Jason D. Shanske Reg. No. 43,915

JDS:lr Enclosure